

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Dec 14, 2006**  
**Secretary of State**

DOCUMENT# N93000000311

**Entity Name:** THE TROPICAL RESORT CONDOMINIUM, INC.**Current Principal Place of Business:**6865 BAY DRIVE  
BOX 24  
MIAMI BEACH, FL 33141 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 190239  
MIAMI BEACH, FL 33119 US**New Mailing Address:**6865 BAY DRIVE  
#24  
MIAMI BEACH, FL 33141 US**FEI Number:** 65-0580076**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BAILLEUL, DOMINIQUE  
601 COLLINS AVENUE  
# G  
MIAMI BEACH, FL 33139 US**Name and Address of New Registered Agent:**REGATTA MANAGEMENT  
309 23RD STREET  
# 300  
MIAMI BEACH, FL 33139 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GRACE PEREZ

12/14/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:****Title:** PDD ( ) Delete  
**Name:** TRELLES, RAFAEL  
**Address:** 6865 BAY DRIVE # 17  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** VPD ( ) Delete  
**Name:** MISSAIR, ANDRES  
**Address:** 6865 BAY DRIVE #20  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** SD ( ) Delete  
**Name:** MORELLI, PIETRO  
**Address:** 6865 BAY DRIVE #09  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** TD ( ) Delete  
**Name:** SINGH, DIEGO  
**Address:** 6865 BAY DRIVE #06  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** D (X) Delete  
**Name:** CASTRO, ANDRES  
**Address:** 6865 BAY DRIVE #19  
**City-St-Zip:** MIAMI BEACH, FL 33141**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** D (X) Change ( ) Addition  
**Name:** CASTRO, ANDRES  
**Address:** 6865 BAY DRIVE #19  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** VPD (X) Change ( ) Addition  
**Name:** MORELLI, PIETRO  
**Address:** 6865 BAY DRIVE #09  
**City-St-Zip:** MIAMI BEACH, FL 33141**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:****Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RAFAEL TRELLES

PDD

12/14/2006

Electronic Signature of Signing Officer or Director

Date